

Print in BLACK ink only and DO NOT STAPLE. For Privacy Notice, see Instructions. Federal Extension - Select this box if you have an approved federal **Vendor Code Department Use Only** extension. Attach a copy Federal Extension (Form 4868). 006 Department of Social Services Application of Eligibility form attached. Filing Status Single Claimed as a Married Filing Married Filing Head of Qualifying Combined Household Widow(er) Dependent Separately Age 65 or Older Blind 100% Disabled Non-Obligated Spouse Select the appropriate boxes that apply. Spouse Deceased Deceased in 2023 Social Security Number in 2023 Spouse's Social Security Number Suffix First Name M.I. Last Name Name Spouse's First Name M.I. Suffix Spouse's Last Name In Care Of Name (Attorney, Executor, Personal Representative, etc.) Attach form if applicable. Present Address (Include Apartment Number or Rural Route) City, Town, or Post Office State ZIP Code County of Residence

You may contribute to any one or all of the trust funds on Line 16. See instructions for more trust fund information.























Kansas





ē	1.	Federal adjusted gross income from federal return (see page 6 of the instructions)	1].[00
Income	2.	Any state income tax refund included in federal adjusted gross income	2].[00
	3.	Total Missouri adjusted gross income	3].[00
	4a.	Tax from federal return. Do not enter federal income tax withheld. Federal tax percentage – Enter the percentage based on your Missouri Adjusted Gross Income, Line 3. Use the chart below to find your percentage. Missouri Adjusted Gross Income Range, Line 3: Federal Tax Percentage: \$25,000 or less].[00]	1. [<u>50</u>]
Deductions	4c.	\$125,001 or more	4c].[00
	7.	Married Filing Combined or Qualifying Widow(er) - \$27,700 If age 65 or older, blind, or claimed as a dependent, see federal return or page 6. If itemizing, see page 14	5 6 7 8].[00
ax		Missouri Taxable Income - Subtract Line 8 from Line 3	9].[00
_	10.	Tax - Use the tax chart on page 10 to figure the tax	10].[00
	11.	Missouri tax withheld from Form(s) W-2 and 1099. Attach copies of Form(s) W-2 and 1099	11].[00
	12.	Missouri estimated tax payments made for 2023. Include overpayment from 2022 applied to 2023.	12].[00
	13.	Total Payments - Add Lines 11 and 12	13].[00
Refund	14.	If Line 13 is more than Line 10, enter the difference. This is your overpayment. If Line 13 is less than Line 10, skip to Line 19	14].[00
	15.	Amount from Line 14 that you want applied to your 2024 estimated tax	15].[00
	16	Workers' Childhood Missouri Military Family	Missouri National Guard d. Trust Fund	00	- 7
	16	e. Memorial Fund	General Nevenue Fund	00)

	Kansas City Soldiers Regional Law Memorial Enforcement Military Museum in	
	16i. Program Fund	00 16l. Medal of Honor 00
o	16m. Code Additional Fund Fund Fund Fund Amount . 00 16n. Code Additional Fund Fund Fund Amount . 00	
Refund (continued)	Total Donation - Add amounts from Boxes 16a through 16n and enter here	16
Refund	17. Amount from Line 14 to be deposited into a Missouri 529 Education Plan (MOST) account. Enter amount from Line E of Form 5632.	
	18. REFUND - Subtract Lines 15, 16, and 17 from Line 14 and enter here	18
	a. Routing Number	c. Checking Savings
	b. Account Number	
Amount	19. AMOUNT DUE - If Line 13 is less than Line 10, enter the difference here	
₹	If you pay by check, you authorize the Department to process the check electronically. Any returned che	eck may be presented again electronically.
	of my knowledge and belief it is true, correct, and complete. By signing or entering my name in the the Department of Revenue with my signature as required under Section 143.561 , RSMo. Declar based on all information of which he or she has knowledge. As provided in Chapter 143 , RS imposed on any individual who files a frivolous return. I also declare under penalties or	ration of preparer (other than taxpayer) is SMo. , a penalty of up to \$500 shall be of perjury that I employ no illegal or
	unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption aliens.	n, credit, or abatement if Femploy such
		Date (MM/DD/YY)
	Signature	Date (MM/DD/YY)
	aliens.	
re	Signature Spouse's Signature (If filing combined, BOTH must sign) F-mail Address	Date (MM/DD/YY)
ignature	Signature Spouse's Signature (If filing combined, BOTH must sign) E-mail Address	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone
Signature	Signature Spouse's Signature (If filing combined, BOTH must sign) F-mail Address	Date (MM/DD/YY) Date (MM/DD/YY)
Signature	Signature Spouse's Signature (If filing combined, BOTH must sign) E-mail Address	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone
Signature	Signature Spouse's Signature (If filling combined, BOTH must sign) E-mail Address Preparer's Signature	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone Date (MM/DD/YY)
Signature	Signature Spouse's Signature (If filling combined, BOTH must sign) E-mail Address Preparer's Signature	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone Date (MM/DD/YY)
Signature	Signature Spouse's Signature (If filing combined, BOTH must sign) E-mail Address Preparer's Signature Preparer's FEIN, SSN, or PTIN	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone Date (MM/DD/YY) Preparer's Telephone State ZIP Code
Signature	aliens. Signature Spouse's Signature (If filing combined, BOTH must sign) E-mail Address Preparer's Signature Preparer's FEIN, SSN, or PTIN Preparer's Address I authorize the Director of Revenue or delegate to discuss my return and attachments with the	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone Date (MM/DD/YY) Preparer's Telephone State ZIP Code The preparer Yes No Sturn or provide sert the
Signature	aliens. Signature Spouse's Signature (If filing combined, BOTH must sign) E-mail Address Preparer's Signature Preparer's FEIN, SSN, or PTIN Preparer's Address I authorize the Director of Revenue or delegate to discuss my return and attachments with thor any member of the preparer's firm. Did you pay a tax return preparer to complete your return, but the preparer failed to sign the ret an Internal Revenue Service preparer tax identification number? If you marked yes, please inst	Date (MM/DD/YY) Date (MM/DD/YY) Daytime Telephone Date (MM/DD/YY) Preparer's Telephone State ZIP Code The preparer Yes No Sturn or provide sert the

	•	 Complete this section only if you itemized deductions on your federal return (see the information Attach a copy of your Federal Form 1040 or 1040-SR (pages 1 and 2) and Federal Schedule A. If you are subject to "additional Medicare tax", attach a copy of Federal Form 8959. 	
		Total fordered itemsised deductions (form Fordered Form 4040 and 4040 CD. Line 40)	1 00
	1.	Total federal itemized deductions (from Federal Form 1040 or 1040-SR, Line 12)	
	2.	2023 Social security tax	2 .00
ons	3.	2023 Railroad retirement tax (Tier I and Tier II)	3 .00
Missouri Itemized Deductions	4.	2023 Medicare tax (see instructions on page 8 and 9)	4
zed D	5.	2023 Self-employment tax (see instructions on page 9)	5 . 00
temi	6	Total - Add Lines 1 through 5	6
onri		State and local income taxes from Federal Schedule A,	
Miss		Line 5a or Enter \$0 if completing the worksheet below	00
	8.	Earnings taxes included in Line 7 (see instructions on page 9)	00
	9.	Net state income taxes - Subtract Line 8 from Line 7 or enter Line 7 from worksheet below	9 . 00
	10.	Missouri Itemized Deductions - Subtract Line 9 from Line 6. Enter here and on Form MO-1040A,	
		Line 5	10
2	Co	Note: If Line 10 is less than your federal standard deduction, see information or complete this worksheet only if your total state and local taxes included in your federal item	
mized Deductions		Note: If Line 10 is less than your federal standard deduction, see information of complete this worksheet only if your total state and local taxes included in your federal item federal Schedule A, Line 5d) exceeds \$10,000 (or \$5,000 for married filing separate taxpayers).	ized deductions
iri kemizea Deauctions	(F	complete this worksheet only if your total state and local taxes included in your federal item rederal Schedule A, Line 5d) exceeds \$10,000 (or \$5,000 for married filing separate taxpayer. Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR,	ized deductions rs).
ssouri nemized beductions	(F	omplete this worksheet only if your total state and local taxes included in your federal item ederal Schedule A, Line 5d) exceeds \$10,000 (or \$5,000 for married filing separate taxpayer	ized deductions
or Missouri remized Deductions	(F	complete this worksheet only if your total state and local taxes included in your federal item rederal Schedule A, Line 5d) exceeds \$10,000 (or \$5,000 for married filing separate taxpayer. Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR,	ized deductions rs).
Line 9 of Missouri Remized Deductions	(F 1.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d.	ized deductions
e tax, Line 9 of imissouri itemized Deductions	1. 2. 3.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d. State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a.	ized deductions rs).
	1. 2. 3. 4.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d. State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Earnings taxes included on Federal Form 1040 or 1040-SR, Schedule A, Line 5a.	ized deductions rs). 1
State income tax, Line 9 of Missouri Remized Deductions	1. 2. 3. 4. 5.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d. State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Earnings taxes included on Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Subtract Line 3 from Line 2.	ized deductions 1
orate income tax,	1. 2. 3. 4. 5. 6.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d. State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Earnings taxes included on Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Subtract Line 3 from Line 2. Divide Line 4 by Line 1.	ized deductions (s). 1
	1. 2. 3. 4. 5. 6.	Enter the sum of your state and local taxes on Federal Form 1040 or 1040-SR, Schedule A, Line 5d. State and local income taxes from Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Earnings taxes included on Federal Form 1040 or 1040-SR, Schedule A, Line 5a. Subtract Line 3 from Line 2. Divide Line 4 by Line 1. Enter \$10,000 (\$5,000 if married filing separately). Multiply Line 6 by percentage on Line 5. Enter here and on Missouri Itemized Deductions,	ized deductions (rs). 1

Mail to:

Missouri Department of Revenue P.O. Box 3370

Refund or No Amount Due:

Missouri Department of Revenue

Phone: (573) 751-3505

Fax: (573) 522-1762

Email: incometaxprocessing@dor.mo.gov **Submission of Individual Income Tax returns**

Email: income@dor.mo.gov Inquiry and correspondence



If yes, visit dor.mo.gov/military/ to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.

Visit: dor.mo.gov/taxation/individual/tax-types/income/ for additional information.

Balance Due:

Phone: (573) 751-5860

Jefferson City, MO 65105-3370

P.O. Box 3222

Jefferson City, MO 65105-3222

2023 Tax Chart

To identify your tax, use your Missouri taxable income from Form MO-1040A, Line 9 and the tax chart in Section A below.

Calculate your Missouri tax using the online tax calculator at <u>dor.mo.gov/taxation/individual/tax-types/income/</u> or by using the worksheet in Section B below. Round to the nearest whole dollar and enter on Form MO-1040A, Line 10.

	Tax Rate Chart	
	If the Missouri taxable income is:	The tax is:
Section A	\$0 to \$1,207 Over \$1,207 but not over \$2,414 Over \$2,414 but not over \$3,621 Over \$3,621 but not over \$4,828 Over \$4,828 but not over \$6,035 Over \$6,035 but not over \$7,242 Over \$7,242 but not over \$8,449 Over \$8,449	

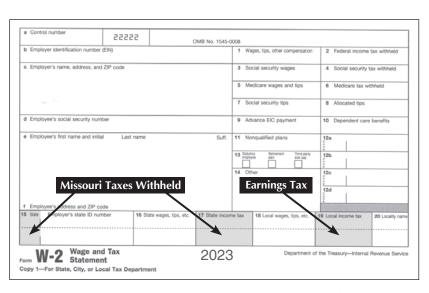
	Tax Calculation	on Worksh	eet				
		Yourself	Spouse		Example A	E	kample B
	Missouri taxable income (Form MO-1040A, Line 9)			_	\$ 3,090	\$	12,000
8	2. Enter the minimum taxable income for your tax bracket (see Section A above). If below \$1,207 enter \$0			<u>-</u>	\$	\$_	8,449
tion	3. Difference - Subtract Line 2 from Line 1 = \$ _			_ =	\$ 676	\$	3,551
Secti	4. Enter the percent for your tax bracket (see Section A above)X		%	_% X	2.5%	_	4.95%
	5. Multiply Line 3 by the percent on Line 4 = \$ _			_ =	\$ 16.90	\$	175.77
	6. Enter the tax from your tax bracket - before applying the percent (see Section A above) + \$ _			_ +	\$ 24	\$_	235
	7. Total Missouri Tax - Add Line 5 and 6. Enter here and on Form MO-1040A, Line 10 = \$ _			_ =	Ψ	\$	410
					(\$40.90		(\$409.77

rounded to the

nearest dollar)

rounded to the

nearest dollar)





Requirements

2023 MOST - Missouri's 529 Education Plan **Direct Deposit Form - Individual Income Tax**

Department Use Only				
(MM/DD/YY)				

	Social Security Number		Spouse's Social Security Number	
axpayer	First Name	M.I.	Last Name	Suffix
Ta	Spouse's First Name	M.I.	Spouse's Last Name	Suffix

If you want to deposit your refund as a contribution to one or more Missouri MOST 529 Education Plan accounts:

- You must have an open Missouri MOST 529 Education Plan account that is administered by the Missouri Education Program. See the contact information below.
- Your total deposit must be at least \$25.
- If your overpayment is adjusted and the amount you requested to deposit exceeds your available refund, the Department will cancel your deposit and issue a refund to you.
- If your refund is offset to pay another debt, the Department will cancel your deposit.

A) Account Number	A) Ai	mount
B) Account Number	B) A	mount
C) Account Number		mount
D) Account Number	D) A	mount
	Tota	I Deposit

Contact Information

MOST-Missouri's 529 Education Plan missourimost.org

Telephone: (888) 414-6678

E-mail: most529@missourimost.org

Ever served on active duty in the United States Armed Forces? If yes, visit dor.mo.gov/military/ to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.

If you wish to deposit all or a portion of your refund into a Missouri MOST 529 Education Plan, you must include this form with your Missouri Individual Income Tax Return.